

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes V No

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

4

	COMMITTEE INFORMATION			
Full Name of Committee (as on Statement of Organization	n) Check if this is a new	v name		
Curts for County Commis	sioner			
2. Acronym or Abbreviated Name (if any)		3. Comm	ittee Telephone Number	
			776-2111	
4. Mailing Address (address where all campaign finance con	respondence is received)	Check if this	is a new address	
10671 Talisman Dr.		1		
5. City, State, ZIP Code			Affiliation (if applicable)	
Noblesville, IN 46060	ORMATION (For Candidate's		ocratic	
7. Full Name of Candidate (include any nickname)	ORMATION (FOI Candidate's		Affiliation or If Independe	nt Candidate
		^		ni Candidate
9. Office Sought (Include district number, if any, Not require	ed for exploratory committee)		nty of Residence	
	District 2		nilton	
TYPE OF F	Comment of the Commen	Electrical States		N CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary Pre-Election Annual Nomination	Other		Pre-Con-	vention
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgo	ing Treasurer (within 10 days amend Stalemen	t of Organization)	Post-Cor	nvention
12. Reporting Period:			COLUMN A	COLUMN B
From: 10-11-02 Through	th: 12-31-08		This Period	Year to Date
13. Cash on hand and investments at the beginning of this r	eporting period.		116.69	
14. Cash on hand and investments January 1, current year.				0
CONTRIBUTIONS AND		PERMIT		KC ST CO.
(Note: these amounts include in-kind contributions and loan	s, as well as cash contributions.)		2-12-2-13	
15a. Itemized (use Schedule A)			3723.63	11065.55
15b. Unitemized		70741	27	9
15c. Add lines 15a and 15b in both columns		BTOTAL	3723.63	11065.55
16. Add lines 13 and 15c in Column A and lines 14 and 15c		TOTAL	3840.32	11/82.27
EXPENDITURI		A DESCRIPTION OF		
(Note: These amounts include in-kind expenditures and loai 17a, Itemized (use Schedule B) (Public Question: use Sche			704070	11 200 30
17b. Unitemized (use schedule b) (Public Question, use sche	due C/		3840,30	11180000
17c. Add lines 17a and 17b in both columns	SI	JBTOTAL	3840.32	1110224
18. Cash on hand and investments at close of this reporting period (TOTAL	380.02	11 1 02.2.
19. Debts OWED BY the committee (use Schedule D)	Subtract 170 month for it out to continue	TOTAL	Ø	INCOME DE LA COMPANSION
20. Debts OWED TO the committee (use Schedule E)			d	
				and the second second second
Signature on File	TIFICATION		1.00	FOR OFFICE USE ONLY
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	Treasurer	1 -	1-10-09	
		D	ate / 85:6	2009 JA I Z AM
		/	/11/09	
	for sale or used for any commercial purpos person who fails to file a complete or acc			7-11-4
	and may be subject to civil penalties. (IC			and therefore



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(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMB	ER	
Page _	2	of	4	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 William Jeffry Curts 10671 Talisman Dr	Contributions: Direct In-Kind (describe)			19/2968
Noblesville, IN 46060 Contributor's Occupation (if required) Marketing Director	Other Receipts: Interest D Loan Misc. (specify) Yard Signs	240.69	*3,599.61	Horcaint Industries Inc.
2 Spot Light of Indianapolis 7444 Shaddand Station Way	Contributions: Direct In-Kind (describe)	4.	156.06	
Indianapolis, IN 46256 Contributor's Occupation (Misequired)	Other Receipts: Interest Loan Misc. (specify) Refund For Commercial	\$156.06	Ø	JeffCorts
William Jeffrey Curts 10671 Talisman Dr.	Contributions: Direct In-Kind (describe)			12/31/68
Noblesville, IN 46060 contributor's Occupation (if required) Marketing Director	Other Receipts: Interest Loan Misc. (specify) Lan Forgiven	#3,326.88	3,599.61	JeffCurs
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)		1361	
Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)	THIS PAGE OF SCHEDULE A	57777/2		
TOTAL OF ALL PAGES OF SCHEDULE		5723/63		

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(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD	
William Jeffry Curts 10671 Talisman Dr. Noblesville, IN 46060 LENDERS COCUPATION: Marketing Director		\$240.69 Loan Yard Signs	10/20/08	#3,599.61	ø	
LENGER'S OCCLPATION:						
LENDER'S OCCUPATION:						
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LENDER'S OCCUPATION:						
LENDER'S OCCUPATION:					The state of the s	
LENDER'S OCCUPATION				OF SCHEDULE D	\$ 0	
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)						

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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER						
Page_	3	_ of _	4			

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF
(Succe, namou, eny, suite, En code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	YEAR-TO-DATE	EXPENDITURE
Harcourt Industries Inc. 7765 S. 175 W. PO Box 128 Milroy, IN 46156-0128		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Yard Signs	240.69	684.27	10/2068
William Jeffrey Curts 10671 Talisman Dr. Noblesville, IN 46060		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	[#] 272.73	272.73	11/1068
William Jeffory Cuts 10671 Talisman Dr. Noblesville IN 46060		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	3326.88	3599.61	12/31/68
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			an ang ali
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			2018
	SUBTOTAL THIS PAG		\$384030		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of t		\$3840.30		

January 16, 2009

To Whom It May Concern:

This is to notify you that I forgive the loan/debt I provided myself with regard to my 2008 election campaign.

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Signature	on	File		

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